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Bib Data Sheet

CONFIRMATION NO. 5824

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/828,647 | <b>FILING OR 371(c) DATE</b><br>04/21/2004<br><b>RULE</b> | <b>CLASS</b><br>435 | <b>GROUP ART UNIT</b><br>1637 | <b>ATTORNEY DOCKET NO.</b><br>033.09-2US |
|------------------------------------|---|---------------------|-------------------------------|--|

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/825,244 04/02/2001 PAT 6,770,439 which is a CIP of 09/698,846 10/27/2000 PAT 6,627,400  
 which is a CIP of 09/684,386 10/04/2000 ABN  
 which is a CIP of 09/602,586 06/21/2000 PAT 6,514,700  
 which is a CIP of 09/561,579 04/28/2000 PAT 6,682,887  
 which is a CIP of 09/303,029 04/30/1999 PAT 6,322,980

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 05/19/2004**

|  |   |                               |                             |                           |                                |
|--|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <i>[Signature]</i> Initials | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>45 | <b>TOTAL CLAIMS</b><br>10 | <b>INDEPENDENT CLAIMS</b><br>1 |
|--|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|

**ADDRESS**  
33603

**TITLE**  
Sets of generalized target-binding e-tag probes

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>530 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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